

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|------------|--------|----------|
| FEE DETERMINATION | <i>WHL</i> | | 12-27-01 |
| O.I.P.E. CLASSIFIER | | | 12-14-01 |
| FORMALITY REVIEW | M.D | 625 | 12-19-01 |
| RESPONSE FORMALITY REVIEW | LC | 1024 | 03-11-02 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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